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01 FC:1501 1370.00 OP
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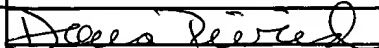
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Deanna M. Rivernider

(Depositor's name)



(Signature)

November 17, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/904,587	07/14/2001	Edward K. Pavelchek	50161-3C	7910

TITLE OF INVENTION: ANTIREFLECTIVE COATING COMPOSITIONS COMPRISING PHOTOACID GENERATORS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$300	\$1670	01/18/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BARRECA, NICOLE M	1756	430-270100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Peter F. Corless2 Darryl P. Frickey3 Edwards & Angell, LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☐ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

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- ☐ A check in the amount of the fee(s) is enclosed.
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☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.



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Authorized Signature _____

Date 11/16/2004Typed or printed name Peter F. CorlessRegistration No. 33,860

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity) (37 C.F.R. 1.311)				Docket No. 50161-3C	
Applicant(s): Pavelchek et al.					
Serial No. 09/904,587	Filing Date 07/14/2001	Examiner Nicole M. Barreca	Group Art Unit 1756	Confirmation No. 7910	
Invention: ANTIREFLECTIVE COATING COMPOSITIONS COMPRISING PHOTOACID GENERATORS					
Mail Stop Issue Fee TO THE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450					
Transmitted herewith are the following for the above-identified application.					
<input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85					
<input checked="" type="checkbox"/> Utility Fee: <u>\$1,370.00</u> <input type="checkbox"/> Design Fee: _____ <input type="checkbox"/> Plant Fee: _____					
<input checked="" type="checkbox"/> Publication Fee: <u>\$ 300.00</u>					
<input checked="" type="checkbox"/> A check in the amount of <u>\$1,700.00</u> is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1105</u> as described below.					
<input type="checkbox"/> Charge the amount of _____					
<input checked="" type="checkbox"/> Credit any overpayment.					
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 _____ <i>Signature</i>			Dated: 11/04/2004		
Peter F. Corless (Reg. No. 33,860) EDWARDS & ANGELL, LLP P.O. Box 55874 Boston, MA 02205 (617) 439-4444					
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_____ Date			 _____ <i>Signature of Person Mailing Correspondence</i>		
_____ <i>Signature</i>			Deanna M. Rivernider		
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